



**APPLICATION FOR OUT OF STATE
LICENSURE BY ENDORSEMENT FOR COSMETOLOGY OR BARBER LICENSES
GEORGIA STATE BOARD OF COSMETOLOGY AND BARBERS
237 Coliseum Drive • Macon, Georgia 31217 • (404) 424-9966
www.sos.ga.gov/plb/cosmetology**

Please read the instructions carefully and be familiar with the laws and rules governing the practice of Cosmetology/Barbers/Hair Designer/Nail Technology/Esthetics in the State of Georgia. Click here for a tutorial video: https://sos.ga.gov/index.php/licensing/plb/16/application_tutorials

****IMPORTANT****

The Board cannot process incomplete applications. Any item that is missing, incomplete or incorrect, will delay processing of your application and cannot be reviewed by the Board. Please review your application before submitting to ensure all information and documentation is complete and correct. Incomplete applications are withdrawn after sixty (60) days. Once an application is withdrawn, you will need to submit a new application with all appropriate fees and documents.

APPLICATION CHECKLIST

Please read and use this checklist to ensure that you submit a **COMPLETE** application. We recommend you keep a copy of your application for your records. Do not submit this checklist with your application—it is for your reference only. The following items are necessary for your application:

- ☐ **NON-REFUNDABLE APPLICATION FEE:**
 - \$75 – Cosmetologist/Nail Technician/Esthetician/Hair Designer/Barber/Barber II
 - \$100 – Instructor LicenseThe payment must be made by check or money order payable to the Georgia State Board of Cosmetology and Barbers. DO NOT SEND CASH OR COUNTER CHECKS. Checks returned for insufficient funds are subject to a \$30.00 service charge pursuant to O.C.G.A. §16-9-20.
- ☐ **NOTARIZED APPLICATION:** The complete application must be mailed to the Board's office at the address listed above, along with your **FEE**.
- ☐ **OTHER STATE LICENSURE CERTIFICATION:** If you are or have ever been licensed in another state, please have that state(s) officially certify that license to the Georgia Board's office. A letter of certification from **EACH** state in which you were issued a license must be sent. The State Board may send the verification electronically via email. The certification from your original state of licensure must indicate that you **passed a written and practical examination in English** without the assistance of a translator.
- ☐ **EDUCATION:** All applicants are required to present proof of high school graduation, or GED, or a postsecondary education, or a college degree (copy of diploma or official transcript). If an applicant's documentation of education is from a foreign country, it must be translated into English and must accompany this application.
- ☐ **CITIZENSHIP:** I have enclosed a copy of my Secure and Verifiable Document (SVD) with this application such as my Driver's License, Passport, or other document **OR** a copy of my current immigration document(s) if I am not a U.S. Citizen which includes either my Alien number or I-94 number and SEVIS number if needed. **Secure and Verifiable Documents Under O.C.G.A. § 50-36-2 Issued August 1, 2011 by the Office of the Attorney General, Georgia**

The Illegal Immigration Reform and Enforcement Act of 2011 ("IIREA") provides that "not later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law's website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary. The list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status. This list may be found on the Board's website at this address:
<http://sos.ga.gov/admin/files/svd2013.pdf>
- ☐ **PROCESSING TIME:** Please allow **15 business days** (does not include weekends or holidays) for processing of applications. If a deficiency letter is received, please allow **15 business days** for processing after submission of your deficient items.
- ☐ **SUBMIT APPLICATION IN A 9X12 or LARGER ENVELOPE – DO NOT STAPLE** pages or check/money order. Do not fold pages of the application. Make check/money order payable to Georgia State Board of Cosmetology and Barbers submit to 237 Coliseum Drive, Macon, GA 31217. We recommend using US Mail or private courier (UPS, FedEx, etc.) with tracking. Keep a copy of your application for your records.

DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION.

Georgia Endorsement Requirements

- (1) Any person licensed in another state desiring to apply for a license or instructor license in cosmetology, barber, barber II, hair design, esthetics, or nail care in the State of Georgia is required to make application using the form furnished by the Georgia State Board of Cosmetology and Barbers, to submit the required application processing fee(s) which is non-refundable, and to show by such application that applicant has met all the requirements of the law and rules of the Board. When such application for endorsement for the appropriate licensing level is properly filled out and returned to the Board, it shall be accompanied by the following:
- (a) for applicants that can provide proof of passing both a written and practical national or state approved examination in English, and:
 - (i) proof of attaining at least 17 years of age;
 - (ii) a copy of a high school diploma, general educational development (GED) diploma, or a postsecondary education or college degree;
 - (iii) be of good moral character;
 - (iv) verification of a license issued by another state or territory that is currently active and in good standing at the appropriate level for the type of license being applied for;
 - 1. if the state verification does not indicate the examination was administered in English, the Board may accept a sworn statement from the applicant that the exam was taken in English;
 - 2. if the verification for the license was issued by the other state or territory based on reciprocity or endorsement, applicant shall submit a verification for the state in which the original license was issued;
 - 3. if the applicant has been licensed in multiple states, a verification from all states the applicant has been licensed in shall be submitted and shall indicate that no board orders or unpaid citations exist in those states.
 - (b) for applicants that cannot provide proof of passing both a written and practical national or state approved examination in English, the Board may, upon all other requirements of 240-11, issue a letter of exam eligibility, and
 - (i) applicants who are made eligible under this section shall not be allowed to take the exam more than three times without passing
 - (ii) upon passing the national examination in English the Board may issue a license.
 - (c) for applicants of good moral character that can provide proof of active duty as a U.S. Military service member, transitioning service member, or separation leave within 24 months of retirement or 12 months of separation, or provide proof that the applicant is a spouse of these service members, the Board may issue a license provided:
 - (i) the applicant holds a valid, active license from another state, or;
 - (ii) the applicant obtained a specialty, certification, training, or experience in the military while a service member which substantially meets or exceeds the requirements to obtain a license in this state.

INSTRUCTORS MUST HAVE BEEN LICENSED FOR AT LEAST ONE YEAR IN QUALIFYING STATE AND MUST HOLD A CURRENT GEORGIA LICENSE AT THE APPROPRIATE LEVEL.

Definitions:

'Barber II' means an individual who performs any one or more of the following services for compensation:

Shaving or trimming the beard;

Cutting or dressing the hair;

Giving facial or scalp massages; or

Giving facial or scalp treatment with oils or cream or other preparations made for this purpose, either by hand or by means of mechanical appliances.

'Master barber' means an individual who performs any one or more of the following services for compensation;

Shaving or trimming the beard;

Cutting or dressing the hair;

Giving facial or scalp massages;

DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION

Giving facial or scalp treatment with oils or cream or other preparations made for this purpose, either by hand or by means of mechanical appliances; or

Singeing and shampooing the hair, coloring or dyeing the hair, or permanently waving or straightening the hair.

'Cosmetologist' means any individual who performs any one or more of the following services for compensation:

Cuts or dresses the hair;

Gives facial or scalp massage or facial and scalp treatment with oils or creams and other preparations made for this purpose, either by hand or mechanical appliance;

Singes and shampoos the hair, colors or dyes the hair, or does permanent waving of the hair;

Performs nail care, pedicure, or manicuring services as defined in paragraph (9) of this Code section; or

Performs the services of an esthetician as defined in paragraph (5) of this Code section. Such individual shall be considered as practicing the occupation of a cosmetologist within the meaning of this Code section; provided, however, that such term shall not mean an individual who only braids the hair by hairweaving; interlocking; twisting; plaiting; wrapping by hand, chemical, or mechanical devices; or using any natural or synthetic fiber for extensions to the hair, and no such individual shall be subject to the provisions of this chapter. Such term shall not apply to an individual whose activities are limited to the application of cosmetics which are marketed to individuals and are readily commercially available to consumer.

'Esthetician' or 'esthetics operator' means an individual who, for compensation, engages in any one or a combination of the following practices, esthetics, or cosmetic skin care:

Massaging the face, neck, décolletage, or arms of a person;

Trimming, tweezing, shaping, or threading eyebrows

Dyeing eyelashes or eyebrows or applying eyelash extensions; or

Waxing, threading, stimulating, cleansing, or beautifying the face, neck, arms, shoulders, back, chest, or legs of a person by any method with the aid of the hands or any mechanical or electrical apparatus or by the use of a cosmetic preparation.

Such practices of esthetics shall not include the diagnosis, treatment, or therapy of any dermatological condition or the use of lasers. Such term shall not apply to an individual whose activities are limited to the application of cosmetics which are marketed to individuals and are readily commercially available to consumers.

'Hair designer' means an individual who performs any one or more of the following services for compensation:

Cuts or dresses the hair; or

Singes and shampoos the hair, applies a permanent or relaxer to hair, or colors or dyes the hair.

'Nail technician' means an individual who, for compensation, performs manicures or pedicures, or trims, files, shapes, decorates, applies sculptured or otherwise artificial nail extensions, or in any way cares for the nails of another person.

HELPFUL HINTS FOR COSMETOLOGY OR BARBER ENDORSEMENT APPLICANTS

Individuals coming from **another country, who do not hold a license issued by another state or territory of the United States**, should submit an application for initial licensure, along with a credentials evaluation from a board approved credentials evaluation provider and the Board will consider education, training, and experience on a case by case basis. **DO NOT SUBMIT THIS ENDORSEMENT APPLICATION.**

PROOF OF LICENSING:

- ☐ Did you include proof of licensing from EVERY state in which you have been licensed, such as an official verification of licensure from the licensing agency/authority?
- ☐ Did you include a statement from the licensing agency/authority of the state that you passed a written and practical examination in English without the assistance of a translator to obtain your license?

PROOF OF SUCCESSFUL COMPLETION OF EDUCATION: (You must submit one (1) of the following):

- ☐ Proof of High School Diploma (copy of diploma or official transcript)
- ☐ Proof of General Education Diploma (copy of diploma or official transcript)

DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION

___ Proof of a postsecondary education (copy of diploma or official transcript of your cosmetology or barber hours)

___ Proof of College or University Degree (copy of diploma or official transcript)

PROOF OF 17 YEARS OF AGE (You must include one of the following):

___ Copy of your birth certificate; or

___ Copy of your driver's license; or

___ Copy of your current passport

INSTRUCTOR APPLICANTS:

___ Proof of a Georgia license at the appropriate master level

___ Proof of at least one year of license as an instructor

PROOF OF NAME CHANGE (You must submit one (1) of the following and all names must match together with proof):

___ Marriage certificate

___ Divorce decree

___ Any legal document(s) which verify a legal name change

DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION



**GEORGIA STATE BOARD of
COSMETOLOGY AND BARBERS**
237 Coliseum Drive • Macon, GA 31217
(404) 424-9966
www.sos.ga.gov/plb/cosmetology

Date Entered _____
Receipt # _____
Submitted \$ _____

APPLICATION FOR OUT OF STATE ENDORSEMENT FOR COSMETOLOGY OR BARBER
Application Fee \$75.00 non-refundable (INSTRUCTOR fee \$100)

Please review your application before submitting to ensure all information and documentation is complete and correct. Incomplete applications are withdrawn after sixty (60) days. Once an application is withdrawn, you will need to submit a new application with all appropriate fees and documents.

License Type (check only ONE license type per application):

- | | |
|-------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> MASTER BARBER | <input type="checkbox"/> MASTER COSMETOLOGIST |
| <input type="checkbox"/> BARBER II | <input type="checkbox"/> COSMETOLOGY INSTRUCTOR |
| <input type="checkbox"/> BARBER INSTRUCTOR | <input type="checkbox"/> ESTHETICIAN |
| <input type="checkbox"/> HAIR DESIGNER | <input type="checkbox"/> ESTHETICS INSTRUCTOR |
| <input type="checkbox"/> HAIR DESIGN INSTRUCTOR | <input type="checkbox"/> NAIL TECHNICIAN |
| | <input type="checkbox"/> NAIL TECH INSTRUCTOR |

I am applying for above referenced license by Endorsement **FROM the State** of _____

1. Legal Name to
appear on License:

LAST FIRST MIDDLE

2. Name as shown on exam records, transcripts or any documentation provided to the Board including maiden name (if different):

LAST FIRST MIDDLE MAIDEN

3. Social Security #¹:

____ - ____ - ____

Date of Birth:

MM - DD - YYYY

¹ This information is authorized to be obtained & disclosed to state & federal agencies pursuant to O.C.G.A. § 19-11-1 & O.C.G.A. § 20-3-295, 42 U.S.C.A. § 551 & 20 U.S.C.A. § 101.

4. Gender: ☐ Male

☐ Female

5. Residential Address:

PHYSICAL ADDRESS - NUMBER AND STREET NAME REQUIRED (P.O. BOX NOT ACCEPTABLE)

APT #

CITY

STATE

ZIP

6. Mailing²

Address:

(P.O. BOX ACCEPTABLE)

² O.C.G.A. §43-1-2 (k) Your name, mailing address and license number are public information and will appear on Secretary of State's website

CITY

STATE

ZIP

7. Daytime Phone #

____ - ____ - ____

Evening Phone #

____ - ____ - ____

8. E-mail Address³: (Please print clearly)

³ Acknowledgement of your application will be sent by email. Also, if further information is needed, email is the most efficient way for Board staff to contact you so that your application can be processed in the most efficient manner. Please notify the Board of any email address change. Your email address will not be shared with any third party.

☐ Please check this box if you are a military spouse or a transitioning service member of the United States armed forces (including the National Guard).

DO NOT SKIP QUESTIONS

Educational Requirements: (Check one and submit copy of diploma or official transcript)

- ☐ High School Diploma or school transcript showing graduation date; or
- ☐ GED Certificate; or
- ☐ Postsecondary Education (diploma or transcript of your Barber or Cosmetology school hours); or
- ☐ College or University Degree

Cosmetology or Barber School: _____

Address: _____ City _____ State _____

Program Attended and Number of credit hours _____
Cosmetology/Esthetician/Nail Care/Hair Designer/Barber/Barber II

Dates of attendance _____ Year graduated _____

License received on ____/____/____ in the state of _____.
MM DD YYYY

Did you take a **national or state** written exam in English without the assistance of a translator: ☐ **yes** ☐ **no**;
If you answered "no", please provide the language used for the written examination: _____

Did you take a **national or state** hands-on practical exam in English without the assistance of a translator: ☐ **yes** ☐ **no**;
If you answered "no", please provide the language used for the hands-on practical examination: _____

FALSIFYING INFORMATION ON YOUR APPLICATION MAY RESULT IN DISCIPLINARY ACTION BY THE GEORGIA STATE BOARD OF COSMETOLOGY AND BARBERS.

Instructor School: (only if applying for instructor license) _____

Address: _____ City _____ State _____

Program Attended and Number of credit hours _____
Instructor for Cosmetology/Esthetician/Nail Care/Hair Designer/Barber

Dates of attendance _____ Year graduated _____

Instructor License received on ____/____/____ in the state of _____.
MM DD YYYY

Did you take a **national or state** written exam in English without the assistance of a translator: ☐ **yes** ☐ **no**;
If you answered "no", please provide the language used for the written examination: _____

Did you take a **national or state** hands-on practical exam in English without the assistance of a translator: ☐ **yes** ☐ **no**;
If you answered "no", please provide the language used for the hands-on practical examination: _____

FALSIFYING INFORMATION ON YOUR APPLICATION MAY RESULT IN DISCIPLINARY ACTION BY THE GEORGIA STATE BOARD OF COSMETOLOGY AND BARBERS.

List each state in which you currently or previously held a license and your license number in that state(s):

License registration: A letter of certification from **each state board** where you obtained a license must be attached in a sealed envelope. The State Board may send the verification electronically via email to verifications@sos.ga.gov. Proof is required that you took and passed the examination in English without the assistance of a translator.

List any licenses currently or previously issued to you by the Georgia Professional Licensing Boards:

LICENSE TYPE

LICENSE NUMBER

Have you previously applied and been denied registration in Georgia at any other time? ☐ Yes ☐ No

If Yes, explain: _____

Please be familiar with the laws and rules of the Georgia State Board of Cosmetology and Barbers including the section relative to ENDORSEMENT at <http://sos.ga.gov/plb/cosmetology>.

PREVIOUS DISCIPLINARY AND CRIMINAL ARREST INFORMATION

APPLICANTS MUST ANSWER ALL 5 QUESTIONS BELOW:

This application will be returned if you do not answer the questions on this page.

Printed Name of Applicant: _____

9. Have you ever been **arrested** or **convicted** of a felony, misdemeanor (other than a minor traffic violation), crime involving moral turpitude, or a crime violating federal or state law relating to controlled substances or dangerous drugs? (DUI and DWI are not minor traffic violations.) For purposes of this question, a "conviction" includes a finding of verdict of guilty, plea of guilty, a plea of nolo contendere, or first offender treatment, and also includes adjudication of guilt or sentence withheld or not entered on the charge (s). **NOTE: The answer to this question is "YES" if an arrest or conviction has been pardoned, expunged, dismissed or deferred, you pled & completed probation under First offender and/or your civil rights have been restored and/or you have received legal advice that the offense will not appear on your criminal record.**



☐ No ☐ Yes ☐

If you answered "Yes" to the question regarding arrest/court convictions, you must submit the following to the Board:

- (a) Submit a letter of explanation and certified copy of final court disposition from the county(s) in which you were arrested/convicted. The court document should include the charges and sentencing information and may be obtained from the Clerk of the Court for the jurisdiction in which you were arrested or convicted.
- (b) Probation/Parole - Submit a statement (on official letterhead) from your probation / parole officer regarding your current status. If probation/parole has been completed, submit certified documents from the courts verifying case closed and completion of probation / parole.

10. Has **any other** licensing board or agency in Georgia or **any other** state ever:



☐ No
☐ No
☐ No
☐ No

☐ Yes
☐ Yes
☐ Yes
☐ Yes

- (a) Denied your application for licensure, renewal, or reinstatement?
- (b) Revoked, suspended, restricted, sanctioned, or probated your license?
- (c) Requested or accepted surrender of your license?
- (d) Reprimanded, fined, or disciplined you?

If you answered "Yes" regarding sanctions from another board, you must request that the licensing board or agency send a certified copy of the action taken against your license with relevant supporting documents to the Board's office. Your application will not be processed until this information is received and reviewed by the Board. Provide the name of the agency or board in the space provided:

Name of State Board or Agency

11. Submit a copy of your **Secure and Verifiable Document (SVD)** with this application such as your **Driver's License, Passport**, or other document **OR** a copy of your **current immigration document(s)** which includes either your Alien number or I-94 number and SEVIS number if needed. The list of acceptable documents for non-U.S. Citizens may be found on the Board's website at this address: <http://sos.ga.gov/admin/files/svd2013.pdf>

YOUR APPLICATION WILL NOT BE PROCESSED UNTIL THIS INFORMATION IS RECEIVED

NOTARIZED SIGNATURE BY COSMETOLOGY OR BARBER APPLICANT

12. APPLICANT AFFIDAVIT



License type (check only one license type per application):

☐ MASTER BARBER

☐ BARBER II

☐ BARBER INSTRUCTOR

☐ HAIR DESIGNER

☐ HAIR DESIGN INSTRUCTOR

☐ MASTER COSMETOLOGIST

☐ COSMETOLOGY INSTRUCTOR

☐ ESTHETICIAN

☐ ESTHETICS INSTRUCTOR

☐ NAIL TECHNICIAN

☐ NAIL TECH INSTRUCTOR

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia State Board of Cosmetology and Barbers and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, electronically or otherwise, I hereby swear and affirm one of the following to be true and accurate pursuant to O.C.G.A. § 50-36-1 (mark 1 or 2 below):

1) _____ I am a United States citizen 18 years of age or older. You must submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or other document.

2) _____ I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. You must submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number. When submitting a "green card", please provide a copy of the front and back of the card.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has attached at least one Secure and Verifiable Document, as required by O.C.G.A. § 50-36-1(e)(1), with this Affidavit.

In making the above representations under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute. I also understand that any failure to make full and accurate disclosures may result in disciplinary action by the Board for which I am applying for licensure.

Print Name of Applicant

Signature of Applicant

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

_____ DAY OF _____ 20____

NOTARY PUBLIC SIGNATURE

MY COMMISSION EXPIRES:

Georgia requires a legible ink seal for notarized documents. If an embossed seal is used a foil overlay or shading should be applied to make the seal legible when digitized.

NOTARY SEAL